

2

National Detector
Dog Manual

Procedures

Incidents

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Introduction

Report incidents involving assaults toward a detector dog, dog aggression and/or situations involving a canine team (example: passenger assaults a canine officer) to the Commissioner's Situation room. Contact local CBP management and the RCPC, following the directions in this manual for the particular situation. Refer to **CBP Directive No. 3340-025B: Commissioner's Situation Room Reporting** in **Appendix H** for further guidance.

Assaults Toward a Detector Dog

If your detector dog is assaulted or interfered with, consult with your Regional Canine Program Coordinator (RCPC) and immediately notify your local port manager.



Important

Under authority of Sec. 501, Title V of Bill H.R. 2559 (commonly known as the Barney Bill), anyone who intentionally harms or interferes with a USDA detector dog may face a fine of up to \$10,000. See [Appendix J](#) for the legislative authority. Refer to the following steps if your dog is assaulted. If the injury or illness is life threatening, contact your supervisor as soon as possible. If the incident is critical but not life threatening, contact your supervisor before taking the dog to the veterinarian. The Canine Officer is responsible for contacting the RCPC.

1. Stabilize the dog using the procedures for “[Injury and Sudden Illness](#)” on [page-2-2-8](#).
2. Get a witness statement from anyone who saw the attack. This includes the PPQ Canine Officer. The statement should include who, what, when, where, and why. Fill out a detector dog assault report (see [Figure 2-2-1](#)).
3. If the attacking passenger is cooperative, get a statement from him/her. Ask local security for assistance in talking to the attacking passenger, if necessary.

4. Get identifying information of the attacking passenger, including the name, address, time of day, and airline on which he or she was flying. Get a copy of the passport and declaration.
5. Photograph the dog, if it has visible injuries, before the visit to the veterinarian, if possible.
6. Take the dog to a veterinarian immediately for examination. Be sure to get the veterinarian's statement.
7. Contact your RCPC immediately.
8. Contact your local Investigative Enforcement Services (IES).



Do **not** write a civil penalty, as legal action will be taken based on the IES investigation.

Detector Dog Assault Report

Name _____
Duty Location _____
Date/Time of Statement _____

Canine _____
Phone _____
Date/Time of Incident _____

Please answer the following questions regarding the incident:

1. Did you witness the incident? Yes _____ No _____

2. Was the detector dog injured as a result of the incident? Yes _____ No _____

If yes, describe the injuries in detail _____

3. Was the aggressor injured in any way by the detector dog? Yes _____ No _____

◆ If yes, complete a Detector Dog Aggression Report.

4. Were there other witnesses to the incident? Yes _____ No _____

If yes, please list the witnesses' names and contact numbers on a separate piece of paper, attached to this report. If possible, have them fill out a separate Detector Dog Assault Report and attach to this form.

◆ Get identifying information of attacking passenger, including the name, address, time of day, and airline he or she was flying on. Photocopy information concerning the attacker: Customs card, passport, driver's license. Attach information to this report.

◆ Follow all instructions on assaults from the National Detector Dog Manual.

Describe your observation of the assault in detail (attach sheet if needed).

Attach any photographs.

FIGURE 2-2-1: Detector Dog Assault Report

Dog Aggression

It is important to collect a detector dog aggression report from each individual who witnessed the incident in its entirety. If any person (including a Canine Officer, a kennel worker, or a passenger) is allegedly bitten by a detector dog or if the detector dog shows any aggression toward a person, then do the following:

- 1.** If the dog behaves aggressively, immediately remove it from the work environment and contact local port management.
- 2.** Secure the dog in a crate until you can take it to the veterinarian for a physical exam. The medical evaluation should be conducted within 48 hours and should include tests for hormonal balance, structural or soft tissue pain or discomfort, a neurological consultation, urine metabolite screening (especially for excessive levels of glutamine, associated with neuronal death) and allergies.
- 3.** If someone is bitten or is allegedly bitten, take the person to a quiet place, such as an office. Call emergency medical service and administer first aid, if necessary. If there is bleeding, use precautions.
- 4.** Get the following information about the person who was allegedly bitten:
 - A.** Name
 - B.** Address
 - C.** Other pertinent information—medications used, permanent residence or temporary residence while in the United States, if a passenger. Make a copy of the passport, customs declaration, and driver's license.
 - D.** If the person refuses emergency medical service, make note of the refusal. Try to get the person's signature on a statement of refusal of emergency medical service (SF 95).
 - E.** Have the individual and all witnesses complete the detector dog aggression report.
 - F.** Photograph the injury if possible.
 - G.** If the aggression incident occurred in the Federal Inspection Service (FIS) area, note it on the passenger's declaration card. Make a copy of the card.
- 5.** If the person goes to a hospital, notify the nearest Office of General Counsel (OGC) at <http://dc-directory.hqnet.usda.gov/phone.php>. Each work location should have the telephone number of the nearest OGC available in case it is needed. Record the number at the end of this section.

6. Direct the victim to complete a Standard Form 95, Claim for Damage, Injury, or Death (Standard Form 95A is a Spanish version). Refer to [Figure 2-2-2](#) for a sample of the form. Direct the victim to return the form to the local PPQ office or to the following address:

USDA-APHIS-ABS
Accounting and Property Services
100 N. Sixth Street, 5th Floor
Minneapolis, MN 55403

For further information about procedures for tort claims, see Departmental Regulation 2510-1, Claims Against the United States, dated July 20, 1992. Work locations should have this regulation on file.

7. Write a detailed detector dog aggression report as soon as possible. Each work location decides the protocol for notifying management after duty hours. Refer to [Figure 2-2-3](#) for a sample of the form.
8. Submit the complete packet to the RCPC **within 72 hrs. of the incident**. Await further instructions regarding the detector dog.
9. Do not allow the detector dog back into service until notified by your RCPC. The incident will have to be investigated thoroughly by your RCPC. The RCPC will inform the RPM, who will inform the NDDPM of the aggressive incident or bite.

Procedures: Incidents
Dog Aggression

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of the form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit To Appropriate Federal Agency:			2. Name, Address of claimant and claimant's personal representative, if any. (See instructions on reverse.) (Number, street, city, State and Zip Code)		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input type="checkbox"/> CIVILIAN		4. DATE OF BIRTH	5. MARITAL STATUS	6. DATE AND DAY OF ACCIDENT	7. TIME (A.M. or P.M.)
8. Basis of Claim (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved, the place of occurrence and the cause thereof) (Use additional pages if necessary.)					
9. PROPERTY DAMAGE					
NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, street, city, State, and Zip Code)					
BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF DAMAGE AND THE LOCATION WHERE PROPERTY MAY BE INSPECTED. (See instructions on reverse side.)					
10. PERSONAL INJURY/WRONGFUL DEATH					
STATE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE NAME OF INJURED PERSON OR DECEDENT.					
11. WITNESSES					
NAME			ADDRESS (Number, street, city, State, and Zip Code)		
12. (See instructions on reverse) AMOUNT OF CLAIM (In dollars)					
12a. PROPERTY DAMAGE		12b. PERSONAL INJURY		12c. WRONGFUL DEATH	
				12d. TOTAL (Failure to specify may cause forfeiture of your rights.)	
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE ACCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side.)				13b. Phone number of signatory	
				14. DATE OF CLAIM	
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM The claimant shall forfeit and pay to the United States the sum of \$2,000 plus double the amount of damages sustained by the United States. (See 31 U.S.C. 3729.)				CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS Fine of not more than \$10,000 or imprisonment for not more than 5 years or both. (See 18 U.S.C. 287, 1001.)	

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STANDARD FORM 95 (Rev. 7-85) (EG)
PRESCRIBED BY DEPT. OF JUSTICE
28 CFR 14.2

FIGURE 2-2-2: Sample of Standard Form 95, Claim for Damage, Injury, or Death

Detector Dog Aggression Report

Name _____
Duty Location _____
Date/Time of Statement _____

Canine _____
Phone _____
Date/Time of Incident _____

Please answer the following questions regarding the incident:

1. Did you witness the incident? Yes _____ No _____

2. What type of incident was it?

Any form of aggression towards the detector dog _____

Re-directed aggression _____

Medical reason (i.e. seizure) _____

Other (i.e. food grabbing) _____

3. Was there a wound as a result of the incident? Yes _____ No _____

If yes, was the skin broken? Yes _____ No _____

If yes, was medical attention required? Yes _____ No _____

Describe the injuries in detail _____

4. Was the dog assaulted as a result of this incident? Yes _____ No _____

◆ If yes, complete a Detector Dog Assault Report.

5. Were there other witnesses to the incident? Yes _____ No _____

If yes, please list the witnesses' names and contact numbers on a separate piece of paper, attached to this report. If possible, have them fill out a separate Detector Dog Aggression Report and attach to this form.

Describe your observation of the incident in detail (attach sheet if needed).

Attach any photographs.

FIGURE 2-2-3: Detector Dog Aggression Report

Emergency Response Plan

Every PPQ work location should have on file an emergency response plan. This plan directs local managers when confronted with civil disturbances and natural disasters, such as flood, fire, hurricane, tornado, earthquake, or inclement weather. At work locations where there is a detector dog team, the emergency response plan should include plans to secure the safety of the detector dog.

The plan should address the following issues for securing the detector dog. This list is not inclusive.

- ◆ Who is responsible for implementing the plan
- ◆ Emergency veterinary care
- ◆ Alternative kenneling
- ◆ Methods of providing basic needs of the detector dog, such as food, water, and exercise
- ◆ Installation of smoke detectors in detector dogs' working environment

Injury and Sudden Illness

The Canine Officer is responsible for determining when the detector dog needs medical care and must ensure the dog's needs are met when it is injured or ill.

1. Stabilize the dog.
2. Administer first aid or emergency care. Refer to **First Aid and Emergency Care** information behind the green tab.
3. If the first aid indicates to immediately take the dog to the veterinarian, then do so.



If the injury or illness is life threatening, contact your supervisor as soon as possible. If the incident is critical but not life threatening, contact your supervisor before taking the dog to the veterinarian. The Canine Officer is responsible for contacting the RCPC.

4. Require a written release from the veterinarian stating that the dog is able to return to work with no restriction.

Detector dogs that have been injured or ill and under a veterinarian's care will not return to work until the release is provided. Therefore, Canine Officers need to keep their supervisors informed since they are assigning and directing work activities. The Canine Officer will send a copy of the release to the RCPC.

5. Get a copy of the veterinary bill.

Incident Contacts

The remainder of this section is for you to record local contacts you wish to have in the manual in case of an incident.

Veterinarian:

Local emergency or veterinary service:

National Animal Poison Control Center:

1-900-680-0000

1-800-548-2423

Local:

Police:

Office of General Counsel:

Other local contacts:
